

BOARD OF PHARMACY

Final Statement of Reasons

Subject Matter of Proposed Regulations: Preprinted, Multiple Checkoff Prescription Blanks

Section Affected: 1717.3

Hearing Date: None Scheduled, None Requested

Updated Information

The informative digest published on August 25, 2000 by the Board of Pharmacy accurately summarizes the final regulatory action taken with respect to this filing.

Comment Received During the 45-Day Comment Period (August 25, 2000 to October 9, 2000)

The board received five letters commenting on the proposed regulation.

1. In a letter dated August 30, 2000, Mr. Kenneth Sain stated that the board should reconsider its proposal because it may lead to increased prescribing and dispensing errors. Mr. Sain stated that a conscientious prescriber would not have a problem with using one preprinted blank per drug being prescribed.

The board responded that contrary to Mr. Sain's belief, preprinted multiple checkoff prescriptions will reduce the frequency of medication errors. Illegible handwriting is the source of many medication errors and encouraging the use of preprinted prescription forms will reduce those errors.

2. In a letter dated September 15, 2000, Steven W. Gray, representing Kaiser Permanente, offered support for the board's proposal. In addition, Mr. Gray stated that subsection (c) should be modified in order to eliminate confusion with a preprinted prescription for multiple items that does not use a checkoff method to indicate items to be dispensed. Further, he suggested that the word "individual" be removed as there are times when a family is being treated for a condition.

The board responded that Mr. Gray's comments were appropriate and modified the proposed regulation to accommodate his concerns. The modified language was submitted for an additional 15 day comment period.

3. In a letter dated September 19, 2000, John Cronin, representing the CPhA, stated that while the CPhA supports the board's proposal, the proposal could be improved by the addition of clarifying language to ensure that prescribers are aware that they must indicate the number of drugs being prescribed.

The board responded that Mr. Cronin's comments were appropriate and modified the proposed regulation to accommodate his concerns. The modified language was submitted for an additional 15 day comment period.

4. In a letter dated October 9, 2000, Rose De Leonardis, president of the California Employee Pharmacist Association, stated her objections to the board's proposal. Specifically, Dr. De Leonardis stated that dispensing from preprinted prescription blanks is often difficult due to small type size used and can lead to more pharmacist eyestrain and mix-ups.

The board responded that California law already permits the use of preprinted checkoff prescriptions. The question posed by this regulation is whether prescribers should be able to use a single preprinted form to prescribe multiple drugs.

5. In a letter dated October 10, 2000, Diane L. Darvey, representing the National Association of Chain Drug Stores (NACDS), stated that the board's proposal should be amended to permit the use of a single electronically transmitted prescription to prescribe multiple drugs.

The board responded that such a change is not needed because existing law already permits multiple drugs to be dispensed from a single electronic prescription. Electronic prescriptions are permitted under current law, and current law also permits prescribers to prescribe more than one drug on a single prescription. The existing electronic prescribing systems the board is aware of, present the prescriber with a template of drugs, dosages, and forms from which to choose. Current law permits the prescriber to select as many drugs as the prescriber chooses from that template for inclusion on a single prescription. These templates are analogous to the preprinted checkoff form.

Further, Ms. Darvey stated that the NACDS has is concerned that preprinted prescription blanks might be easily duplicated resulting in forged prescriptions.

The board responded that preprinted prescription forms are no more or less subject to forgery or illicit duplication than any other prescription form. California law only requires that prescription forms contain certain data elements and imposes no requirements designed to reduce forgery or illicit duplication.

Further, Ms. Darvey stated that the NACDS is concerned that prescribers might cause delays in dispensing medications when they forget to indicate the number of drugs are being prescribed.

The board responded that other prescriptions are delayed because of illegible handwriting or missing data elements. The prescribing process fundamentally depends on thoughtful, complete and clear action by the prescriber. No form or any other device will entirely remove the likelihood that prescribers will omit essential information.

Further, Ms. Darvey stated that the NACDS is concerned that the format of some preprinted blanks might lead to confusion as to which strength of a drug in an array of dosing strengths is being

selected.

Comment Received During the 15-Day Comment Period (February 4, 2001 to February 19, 2001)

The Board of Pharmacy received one comment during the 15 day comment period.

1. In a letter dated February 5, 2001, Mr. Kenneth Sain stated that despite the merit of using preprinted multiple checkoff prescription forms in certain practice settings, the board should reconsider its proposal because it may lead to increased prescribing and dispensing errors.

The board responded that contrary to Mr. Sain's belief, preprinted multiple checkoff prescriptions will reduce the frequency of medication errors. Illegible handwriting is the source of many medication errors and encouraging the use of preprinted prescription forms will reduce those errors.

Local Mandate: None.

Business Impact: The Board of Pharmacy has determined that the proposed regulatory action would have no significant adverse impact on California business enterprises and individuals, including the ability of California businesses to compete with businesses in other states.

Consideration of Alternatives: The Board of Pharmacy determined that no alternative presented would be more effective than or as effective as and less burdensome on affected private persons than the proposal described.